

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000054739

**Entity Name:** AJH WEST COAST, LLC

**Current Principal Place of Business:**

17348 NICASIO JAY AVE  
WEEKI WACHEE, FL 34614

**Current Mailing Address:**

17348 NICASIO JAY AVE  
WEEKI WACHEE, FL 34614 US

**FEI Number:** 20-2578928

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FYOCK, SHERRILYN  
17348 NICASIO JAY AVE  
WEEKI WACHEE, FL 34614 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGRM  
Name FYOCK, SHERRILYN C  
Address 17348 NICASIO JAY AVE  
City-State-Zip: WEEKI WACHEE FL 34614

Title MGRM  
Name FYOCK, FRANK N  
Address 17348 NICASIO JAY AVE  
City-State-Zip: WEEKI WACHEE FL 34614

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SHERRILYN C FYOCK

MGRM

03/17/2017

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date